

# 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000085811

Entity Name: K SWEET, INC.

FILED  
Jul 19, 2005  
Secretary of State

## Current Principal Place of Business:

1012 E. GIBSON ST.  
ARCADIA, FL 34266

## New Principal Place of Business:

902 W GIBSON ST.  
ARCADIA, FL 34266

## Current Mailing Address:

1012 E. GIBSON ST.  
ARCADIA, FL 34266

## New Mailing Address:

PO BOX 1394  
ARCADIA, FL 34265

FEI Number: 16-1682375

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BONVILLE, PATRICIA A  
1012 E. GIBSON ST.  
ARCADIA, FL 34266 US

## Name and Address of New Registered Agent:

BONVILLE, PATRICIA A  
902 W GIBSON ST  
ARCADIA, FL 34266 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: PATRICIA A BONVILLE

07/19/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: KILLMON, THOMAS  
Address: 1452 SW FLETCHER RD.  
City-St-Zip: ARCADIA, FL 34266

Title: D ( ) Delete  
Name: KILLMON, THOMAS L  
Address: 260 GRAPE DR.  
City-St-Zip: LAKE PLACID, FL 33852

Title: D ( ) Delete  
Name: BONVILLE, PATRICIA A  
Address: 1012 E. GIBSON ST.  
City-St-Zip: ARCADIA, FL 34266

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PATRICIA BONVILLE

D

07/19/2005

Electronic Signature of Signing Officer or Director

Date